

AMENDMENT NO. 5

This Amendment modifies Contract No. 11-84-038 for Food Service Management by and between the County of Cook, Illinois, herein referred to as "County" and CBM Premier Management, LLC authorized to do business in the State of Illinois hereinafter referred to as "Contractor":

RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the County Board on July 24, 2012, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide food service management (hereinafter referred to as the "Services") from July 24, 2012 through July 23, 2015, with three, one-year renewal options, in an amount not to exceed \$38,360,583.23; and

Whereas, Amendment No. 1 was executed by the CPO on September 13, 2012 to identify subcontractors; and

Whereas, Amendment No. 2 was approved by the County Board on January 15, 2014 and executed by the CPO on February 18, 2014 for rate adjustment based on the CPI and an increase in the amount of \$570,359.78; and

Whereas, Amendment No. 3 was approved by the County Board on March 11, 2015 and executed by the CPO on March 19, 2015 for a rate adjustment based on the CPI and an increase in the amount of \$293,222.83; and

Whereas, Amendment No. 4 was approved by the County Board on June 10, 2015 and executed by the CPO on June 20, 2015 to renew the Contract for one year beginning July 24, 2015 through July 23, 2016, and increase the Contract in the amount of \$12,786,861.07; and

Whereas, the Contract will expire July 23, 2016 and the agreed upon Services are still required; and

Whereas, an increase in the amount of \$12,070,000.00 is required for the continuation of Services; and

Whereas, the County and Contractor desire to renew the Contract for one year beginning on July 24, 2016 through July 23, 2017.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

1. The Contract is renewed through July 23, 2017.
2. The Contract is increased by \$12,070,000.00 and the Total Contract Amount is revised to \$64,081,026.91.
3. The attached Identification of Subcontractor/Supplier/Subconsultant, MBE/WBE Utilization Plan, and Economic Disclosures Statement forms are incorporated and made a part of this Contract.
4. All other terms and conditions remain as stated in the Contract.

In witness whereof, the County and Contractor have caused this Amendment No. 5 to be executed on the date and year last written below.

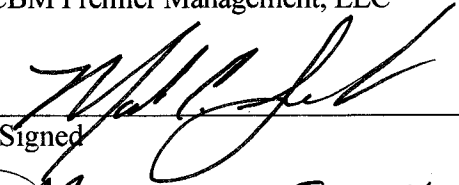
County of Cook, Illinois

CBM Premier Management, LLC

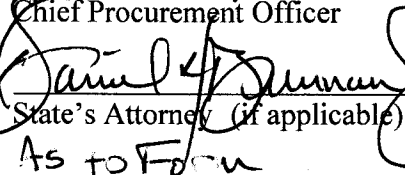
By:


Chief Procurement Officer

Signed



By:


State's Attorney (if applicable)
As to Form

Type or print name

MARCE C. Seindhaas, Jr.

Title

Managing Member

Date:

17 June 2014

Date:

May 10, 2016

Contract No. 11-84-038
Vendor Name: CBM PREMIER MANAGEMENT, LLC

ATTACHMENTS

Identification of Subcontractor/Supplier/Subconsultant Form

MBE/WBE Utilization Plan

Economic Disclosures Statements

Contract No. 11-84-038
Vendor Name: CBM PREMIER MANAGEMENT, LLC

Identification of Subcontractor/Supplier/Subconsultant Form

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

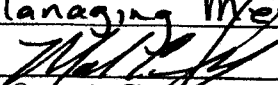
The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 11-84-038	Date: MAY 12, 2016
Total Bid or Proposal Amount: \$12,070,000.00	Contract Title: FOOD SERVICE MANAGEMENT
Contractor: CBM PREMIER MANAGEMENT, LLC	Subcontractor/Supplier/ Subconsultant to be added or substitute: LA BAGUETTE NORTH, INC.
Authorized Contact for Contractor: MARLIN SEJNOHA	Authorized Contact for Subcontractor/Supplier/ Subconsultant: GUILLEMINA URIBE
Email Address marlin.sejnoha@ (Contractor): cbmmanagedservices.com	Email Address (Subcontractor): CHOPY78@HOTMAIL.COM
Company Address (Contractor): 5680 S. ARCHER	Company Address (Subcontractor): 5712 N. CLARK STREET
City, State and Zip (Contractor): CHICAGO, IL 60638	City, State and Zip (Subcontractor): CHICAGO, IL 60606
Telephone and Fax (Contractor): 312-432-0399 (P) 312-432-1508 (F)	Telephone and Fax (Subcontractor): TEL - 773-878-8556 FAX - 773-878-8580
Estimated Start and Completion Dates (Contractor): 7/24/16 - 7/23/17	Estimated Start and Completion Dates (Subcontractor):

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
BAKERY PRODUCTS	3%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan.** Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.

Contractor
CBM Premier Management, LLC - Marlin Sejnoha
 Name
Managing Member
 Title

 Prime Contractor Signature
 Date **5/12/16**

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 11-84-038	Date: MAY 12, 2016
Total Bid or Proposal Amount: \$12,070,000.00	Contract Title: FOOD SERVICE MANAGEMENT
Contractor: CBM PREMIER MANAGEMENT, LLC	Subcontractor/Supplier/ Subconsultant to be added or substitute: CRISTINA FOODS, INC.
Authorized Contact for Contractor: MARLIN SEJNOHA	Authorized Contact for Subcontractor/Supplier/ Subconsultant: CESAR DOVILINA, JR
Email Address marlin.sejnoha@cbmmanagedservices.com (Contractor):	Email Address (Subcontractor): INFOCRISTINAFOODS.COM
Company Address 5680 S. ARCHER (Contractor):	Company Address (Subcontractor): 4555 S. RAGINE
City, State and Zip (Contractor): CHICAGO, IL 60638	City, State and Zip (Subcontractor): CHICAGO, IL 60609
Telephone and Fax (Contractor): 312-432-0399 (P) 312-432-1508 (F)	Telephone and Fax (Subcontractor): TEL-312-829-0360 FAX-312-829-0408
Estimated Start and Completion Dates (Contractor): 7/24/16 - 7/23/17	Estimated Start and Completion Dates (Subcontractor):

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
FOOD PRODUCTS, DAIRY PRODUCTS, JANITORIAL SUPPLIES, DISPOSABLES	12.5%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor **CBM Premier Management, LLC - Marlin Sejnoha**
Name **Managing Member**
Title **[Signature]**
Prime Contractor Signature **[Signature]** Date **5/12/16**

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 11-84-038	Date: MAY 12, 2016
Total Bid or Proposal Amount: \$12,070,000.00	Contract Title:
Contractor: CBM PREMIER MANAGEMENT, LLC	Subcontractor/Supplier/ Subconsultant to be added or substitute: MCMAHON FOOD CORPORATION
Authorized Contact for Contractor: MARLIN SEJNOHA	Authorized Contact for Subcontractor/Supplier/ Subconsultant: BRIDGET MCMAHON-HEALY
Email Address marlin.sejnoha@cbmmanagedservices.com (Contractor):	Email Address (Subcontractor): bridget.mcmahonhealy@mcma.com
Company Address (Contractor): 5680 S. ARCHER	Company Address (Subcontractor): 2110 S. MARSHALL BLVD
City, State and Zip (Contractor): CHICAGO, ILL. 60638	City, State and Zip (Subcontractor): CHICAGO, IL 60623
Telephone and Fax 312-432-0399 (P) 312-432-1508 (F) (Contractor)	Telephone and Fax TEL-773-522-0100 FAX-773-522-0393 (Subcontractor)
Estimated Start and Completion Dates 7/24/16 - 7/23/17 (Contractor)	Estimated Start and Completion Dates (Subcontractor)

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
DAIRY PRODUCT DISTRIBUTION	50%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor **CBM Premier Management, LLC - Marlin Sejnoha**
 Name **Managing Member**
 Title **[Signature]**
 Prime Contractor Signature **[Signature]** Date **5/12/16**

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

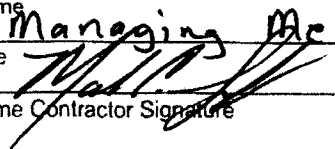
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Bid/RFP/RFQ No.: 11-B4-038	Date: MAY 12, 2016
Total Bid or Proposal Amount: \$12,070,000.00	Contract Title: FOOD SERVICE MANAGEMENT
Contractor: CBM PREMIER MANAGEMENT, LLC	Subcontractor/Supplier/ Subconsultant to be added or substitute: KPR FOOD SERVICE
Authorized Contact for Contractor: MARLIN SESNOHA	Authorized Contact for Subcontractor/Supplier/ Subconsultant: KETAN BAMAN
Email Address, marlin.sejnoha@ (Contractor): cbmmanagedservices.com	Email Address (Subcontractor): CHEPOO@HOTMAIL.COM
Company Address 5680 S. ARCHER (Contractor):	Company Address (Subcontractor): 2141 S. RALINE
City, State and CHICAGO, IL Zip (Contractor): 60638	City, State and Zip (Subcontractor): CHICAGO, IL 60608
Telephone and Fax 312-432-0399 (P) (Contractor) 312-432-1508 (F)	Telephone and Fax TELE - 312-735-4042 (Subcontractor) FAX - 312-666-9242
Estimated Start and Completion Dates 7/24/16 - 7/23/17 (Contractor)	Estimated Start and Completion Dates (Subcontractor)

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
PAPER SUPPLIES, BREAKFAST BARS, JUICES, PACKAGING FILM, ^{SHANK} WRAP	12.5%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor
CBM Premier Management, LLC - Marlin Sejnoha
Name
Managing Member
Title

Prime Contractor Signature
Date **5/12/16**

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 11-84-038	Date: MAY 12, 2016
Total Bid or Proposal Amount: \$12,070,000.00	Contract Title: FOOD SERVICE MANAGEMENT
Contractor: CBM PREMIER MANAGEMENT, LLC	Subcontractor/Supplier/ Subconsultant to be added or substitute: CIPRIANI'S PASTA & SAUCE
Authorized Contact for Contractor: MARLIN SEJNOHA	Authorized Contact for Subcontractor/Supplier/ Subconsultant: ANNETT JOHNSON
Email Address marlin.sejnoha@cbmmanagedservices.com (Contractor):	Email Address (Subcontractor): Ciprianispasta@GMAIL.COM
Company Address 5680 S. ARCHER (Contractor):	Company Address (Subcontractor): 1025 WEST END AVE
City, State and Zip (Contractor): CHICAGO, IL 60638	City, State and Zip (Subcontractor): CHICAGO HEIGHTS, IL 60411
Telephone and Fax (Contractor): 312-432-0399 (P) 312-432-1508 (F)	Telephone and Fax (Subcontractor): TEL - 630-851-3086
Estimated Start and Completion Dates (Contractor): 7/24/16 - 7/23/17	Estimated Start and Completion Dates (Subcontractor):

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
PAPER PRODUCTS, DISPOSABLES, SANITATIONAL SUPPLIES & CHEMICALS	2%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor **CBM Premier Management, LLC - Marlin Sejnoha**
 Name **Managing Member**
 Title **[Signature]**
 Prime Contractor Signature **[Signature]** Date **5/12/16**

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:
☐ Disqualification
☐ Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: <u>11-84-038</u>	Date: <u>MAY 12, 2016</u>
Total Bid or Proposal Amount: <u>\$12,070,000.00</u>	Contract Title: <u>FOOD SERVICE MANAGEMENT</u>
Contractor: <u>CBM PREMIER MANAGEMENT, LLC</u>	Subcontractor/Supplier/ Subconsultant to be added or substitute: <u>WHITNEY FOODS</u>
Authorized Contact for Contractor: <u>MARLIN SEJNOHA</u>	Authorized Contact for Subcontractor/Supplier/ Subconsultant: <u>WHITNEY FITZGERALD</u>
Email Address: <u>marlin.sejnoha@cbmmanagedservices.com</u>	Email Address (Subcontractor): <u>WHITNEYFOODS@AOL.COM</u>
Company Address (Contractor): <u>5680 S. ARCHER</u>	Company Address (Subcontractor): <u>2141 S. DAMEN</u>
City, State and Zip (Contractor): <u>CHICAGO, IL 60638</u>	City, State and Zip (Subcontractor): <u>CHICAGO, IL 60608</u>
Telephone and Fax (Contractor): <u>312-432-0399 (P)</u> <u>312-432-1508 (F)</u>	Telephone and Fax (Subcontractor): <u>TEL - 773-299-1340</u> <u>FAX - 773-299-1345</u>
Estimated Start and Completion Dates (Contractor): <u>7/24/16 - 7/23/17</u>	Estimated Start and Completion Dates (Subcontractor):

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
<u>FRESH PRODUCE, FRESH & FROZEN VEGETABLES, FRUITS & FRUIT MIXED</u>	<u>1%</u>

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan.** Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.

Contractor CBM Premier Management; LLC - Marlin Sejnoha
 Name Managing Member
 Title [Signature] Date 5/12/16
 Prime Contractor Signature _____

Contract No. 11-84-038
Vendor Name: CBM PREMIER MANAGEMENT, LLC

MBE/WBE Utilization Plan



TONI PRECKWINKLE

PRESIDENT

**Cook County Board
of Commissioners**

RICHARD R. BOYKIN
1st District

ROBERT STEELE
2nd District

JERRY BUTLER
3rd District

STANLEY MOORE
4th District

DEBORAH SIMS
5th District

JOAN PATRICIA MURPHY
6th District

JESUS G. GARCIA
7th District

EDWIN REYES
8th District

PETER N. SILVESTRI
9th District

BRIDGET GAINER
10th District

JOHN P. DALEY
11th District

JOHN A. FRITCHEY
12th District

LARRY SUFFREDIN
13th District

GREGG GOSLIN
14th District

TIMOTHY O. SCHNEIDER
15th District

JEFFREY R. TOBOLSKI
16th District

SEAN M. MORRISON
17th District

OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60602 • (312) 603-5502

May 25, 2016

Ms. Shannon Andrews
Chief Procurement Officer
County Building, Room 1018
Chicago, IL 60602

Re: Contract No. 11-84-038, Amendment No. 5, Food Service Management

Dear Ms. Andrews:

The Office of Contract Compliance is in receipt of the above-reference contract amendment and has reviewed it for compliance with the Minority- and Women- owned Business Enterprises Ordinance. After careful review it has been determined that this amendment is responsive to the Ordinance.

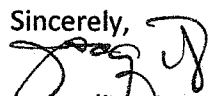
Bidder: CBM Premier Management, LLC

Original Contract Amount: \$38,360,583.23
Identify Subcontractors: Amendment No. 1
Increase Contract Amount: \$ 570,359.78, Amendment No. 2
Increase Contract Amount: \$ 293,222.83, Amendment No. 3
Increase Contract Amount: \$12,786,861.07, Amendment No. 4
Increase Contract Amount: \$12,070,000.00, Amendment No. 5
New Contract Amount: \$64,081,026.91
Term of Contract: July 24, 2016 through July 23, 2017
Contract Goals: 25% MBE, 10% WBE

<u>MBE/WBE</u>	<u>Status</u>	<u>Certifying Agency</u>	<u>Commitment*</u>
Cristina Foods, Inc.	MBE (9)	Cook County	12.5% Direct
K & R Foodservice, Inc.	MBE (8)	City of Chicago	12.5% Direct
Ciprianis Pasta & Sauce Inc.	WBE (7)	Cook County	2% Direct
LaBaguette North Inc.	WBE (9)	Cook County	3% Direct
McMahon Food Corporation	WBE (7)	Cook County	5% Direct
Whitney Foods Incorporated	WBE (7)	Cook County	1% Direct

*Commitment percentages are based on the new contract value.

Original MBE/WBE forms were used in the determination of the responsiveness of this contract.

Sincerely,

Jacqueline Gomez
Director

JG/la

Cc: Colleen Chambers, Sheriff's Office

cbm
PREMIER
★ **MANAGEMENT** ★

May 6, 2016

Cook County Building
Contract Compliance
118 North Clark Street
Chicago, IL 60602
Attn: Ms. Lisa Alexander
Deputy Director

Dear Ms. Alexander,

Please see below, the updated Utilization Plan for CBM Premier Management including updated MBE/WBE Letters of Intent for the following companies:

MBE Utilization plan:

Cristina Foods, Inc.	12.5 %
K and R Food Service, Inc.	12.5%
Total:	25 %

WBE Utilization Plan:

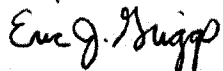
McMahon Foods	5%
La Baguette North, Inc.	3%
*Cipriani's Pasta and Sauce	2%
Whitney Foods, Inc.	1%
Total:	11%

*Please note that Cipriani's Pasta and Sauce is a WBE certified by the National Women's Business Enterprise Council. Cipriani was included in the original CBM Premier Management utilization plan and subsequently, CBM counted Cipriani's purchases toward meeting the WBE percentage goal.

CBM Premier Management has experienced difficulty finding a WBE vendor certified by the County or the City to replace Cipriani. CBM Premier Management, requests the County to continue to count Cipriani's purchases until a qualified replacement can be found.

If you have any questions, please contact me at 773-606-8013.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric J. Griggs". The signature is written in a cursive, flowing style.

Eric J. Griggs
Director of Diversity

MBE/WBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions - Section 19.

I. BIDDER/PROPOSER MBE/WBE STATUS: (check the appropriate line)

- ☐ Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of current Letter of Certification)
- ☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit - available online at www.cookcountyil.gov/contractcompliance)
- ☒ Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent - Form 2).

II. ☐ Direct Participation of MBE/WBE Firms ☐ Indirect Participation of MBE/WBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: CRISTINA FOODS
Address: 4555 S. RACINE
E-mail: INFO@CRISTINAFOODS.COM
Contact Person: CESAR DOVILINA, JR. Phone: 312-829-0360
Dollar Amount Participation: \$ _____
Percent Amount of Participation: 12.5% %
*Letter of Intent attached? Yes ☒ No _____
*Current Letter of Certification attached? Yes ☒ No _____

MBE/WBE Firm: K & R FOOD SERVICE
Address: 2141 S. RACINE
E-mail: CHEOPD@HOTMAIL.COM
Contact Person: KETAN BAMAN Phone: 312-735-4042
Dollar Amount Participation: \$ _____
Percent Amount of Participation: 12.5% %
*Letter of Intent attached? Yes ☒ No _____
*Current Letter of Certification attached? Yes ☒ No _____

Attach additional sheets as needed.

* Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: CRISTINA FOODS

Certifying Agency: COOK COUNTY

Contact Person: CESAR DOVALINA, JR.

Certification Expiration Date: _____

Address: 4555 S. RACINE

Ethnicity: HISPANIC

City/State: CHICAGO, IL Zip: 60609

Bid/Proposal/Contract #: 11-84-038

Phone: 312-829-0360 Fax: 312-829-0408

FEIN #: 36-3593300

Email: INFO@CRISTINAFOODS.COM

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

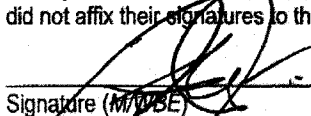
The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

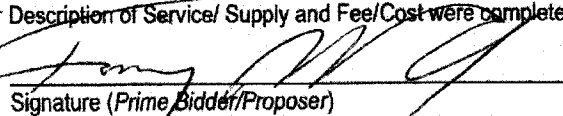
FOOD PRODUCTS, DIARY PRODUCTS, JANITORIAL & CLEANING SUPPLIES,
DISPOSABLE PAPER PLASTICS, SMALL WARES

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

12.5%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.


Signature (M/WBE)


Signature (Prime Bidder/Proposer)

CESAR DOVALINA, JR.
Print Name

TIMOTHY RAND
Print Name

CRISTINA FOODS, INC.
Firm Name

CBM PREMIER MANAGEMENT
Firm Name

5/2/16
Date

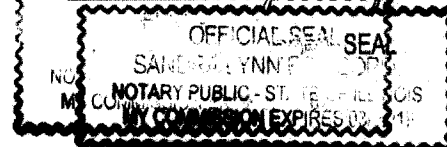
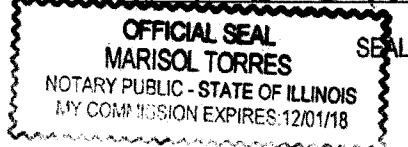
5/2/16
Date

Subscribed and sworn before me

Subscribed and sworn before me

this 2 day of May, 2016
Notary Public Marisol Torres

this 2nd day of May, 2016
Notary Public Sandra Lynn Eusebio





TONI PRECKWINKLE

PRESIDENT

**Cook County Board
of Commissioners**

RICHARD R. BOYKIN

1st District

ROBERT STEELE

2nd District

JERRY BUTLER

3rd District

STANLEY MOORE

4th District

DEBORAH SIMS

5th District

JOAN PATRICIA MURPHY

6th District

JESUS G. GARCIA

7th District

LUIS ARROYO, JR.

8th District

PETER N. SILVESTRI

9th District

BRIDGET GAINER

10th District

JOHN P. DALEY

11th District

JOHN A. FRITCHEY

12th District

LARRY SUFFREDIN

13th District

GREGG GOSLIN

14th District

TIMOTHY O. SCHNEIDER

15th District

JEFFREY R. TOBOLSKI

16th District

SEAN M. MORRISON

17th District

OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60620 • (312) 603-5502

January 7, 2016

Mr. Cesar Dovalina, Jr.
President
Cristina Foods, Inc.
4555 South Racine Ave.
Chicago, IL 60607

Annual Certification Expires: February 6, 2017

Dear Mr. Dovalina:

Congratulations on your continued eligibility for Certification as a Minority Business Enterprise (MBE) by Cook County Government. This MBE Certification is valid until **February 6, 2020**.

As a condition of continued Certification, you must file a **"No Change Affidavit"** within **sixty (60) days prior** to the date of annual expiration. Failure to file this Affidavit shall result in the termination of your certification. You must notify Cook County Government's Office of Contract Compliance of any change in ownership or control or any other matters or facts affecting your firm's eligibility for Certification within **fifteen (15) business days** of such changes.

Cook County Government may commence action to remove your firm as a **MBE** vendor if you fail to notify us of any changes of facts affecting your firm's certification, or if your firm otherwise fails to cooperate with the County in any inquiry or investigation. Removal of status may also be commenced if your firm is found to be involved in bidding or contractual irregularities.

Your firm's name will be listed in Cook County's Directory of Minority Business Enterprise, Women Business Enterprise and/ or Veteran Business Enterprise in the area(s) of specialty:

**REGULAR DEALER: FOOD, BEVERAGES AND JANITORIAL SUPPLIES; DISPOSABLE
PAPER & PLASTIC; RESTAURANT UTENSILS & EQUIPMENT**

Your firm's participation on County contracts will be credited toward **MBE** goal in your area(s) of specialty. While your participation on Cook County contracts is not limited to your specialty, credit toward **MBE** goal will be given only for work performed in the specialty category.

Thank you for your continued interest in Cook County Government's Minority, Women and Veteran Business Enterprise Programs.

Sincerely,

Jacqueline Gomez
Contract Compliance Director

JG/ehw

2020

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: K & R Food Service

Certifying Agency: CITY OF CHICAGO

Contact Person: KETAN BAMAN

Certification Expiration Date: _____

Address: 2141 S. RACINE

Ethnicity: ASIAN AMERICAN

City/State: CHICAGO, IL Zip: 60608

Bid/Proposal/Contract #: 11-84-038

Phone: 312-735-4042 Fax: 312-666-9242

FEIN #: 36-3970905

Email: CHEEPOO@HOTMAIL.COM

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

PAPER SUPPLIES, BREAKFAST BARS, JUICES, PACKAGING FILM AND
SHRINK WRAP, ETC...

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

12.5 %

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Baman
Signature (M/WBE)

Timothy Rand
Signature (Prime Bidder/Proposer)

KETAN BAMAN
Print Name

TIMOTHY RAND
Print Name

K & R Food Service
Firm Name

CEM PREMIER MANAGEMENT
Firm Name

MAY 2, 2016
Date

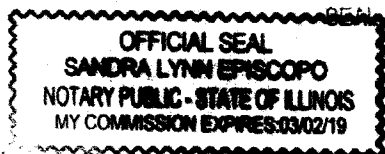
MAY 2, 2016
Date

Subscribed and sworn before me

Subscribed and sworn before me

this 2nd day of May, 2016.
Notary Public Sandra Lynn Episcopo

this 2nd day of May, 2016.
Notary Public Sandra Lynn Episcopo



M/WBE Utilization Plan - Form 2



Revised: 1/29/14

Certification: View**Help & Tools** [Certification List](#)[Submit Change Request](#)[Add Date Alert](#)**Vendor Information**

Business Name	K & R Foodservice, Inc.
VendorID	20069345
Primary Owner's Name	Ketan Baman
Ethnic Group	Asian American
Gender	Male

Certification Information

Certifying Agency	City of Chicago
Certification Type	MBE - Minority Business Enterprise
Effective Date	5/23/2012
Renewal/Anniversary Date	6/1/2016

Contact Information

Main Company Email	cheapo1214@hotmail.com
Main Phone	312-432-0176
Main Fax	312-666-9242
Internet Web Page	

Addresses

Physical Address	2141 South Racine Ave Chicago, IL 60608-3222
Mailing Address	2141 South Racine Ave Chicago, IL 60608-3222

Business Capabilities

Business certified for	Wholesale Food Establishment; Distributor of Canned Fruit Juices, Pre-cooked Meat Products, Snacks, Vegetables; Supplier of Paper Products for Food (Plate, Napkins, Cups)								
Full Description of Capabilities/Products	Wholesale Food Establishment; Distributor of Canned Fruit Juices, Pre-cooked Meat Products, Snacks, Vegetables; Supplier of Paper Products for Food (Plate, Napkins, Cups)								
Commodity Codes	<table><tbody><tr><td>NIGP 16546</td><td>Food Serving Dinnerware (Not Otherwise Classified)</td></tr><tr><td>NIGP 38554</td><td>Juices</td></tr><tr><td>NIGP 96240</td><td>Food Distribution Services</td></tr><tr><td>NIGP 99844</td><td>Food, Sale of Surplus and Obsolete Items</td></tr></tbody></table>	NIGP 16546	Food Serving Dinnerware (Not Otherwise Classified)	NIGP 38554	Juices	NIGP 96240	Food Distribution Services	NIGP 99844	Food, Sale of Surplus and Obsolete Items
NIGP 16546	Food Serving Dinnerware (Not Otherwise Classified)								
NIGP 38554	Juices								
NIGP 96240	Food Distribution Services								
NIGP 99844	Food, Sale of Surplus and Obsolete Items								

Owner Ethnicity and Gender

Ethnic Group	Asian American
Gender	Male
DBE Ethnic Group	Asian Pacific American

MBE/WBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions - Section 19.

I. BIDDER/PROPOSER MBE/WBE STATUS: (check the appropriate line)

- ☐ Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of current Letter of Certification)
- ☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit - available online at www.cookcountyl.gov/contractcompliance)
- ☒ Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent - Form 2).

II. ☒ **Direct Participation of MBE/WBE Firms** ☐ **Indirect Participation of MBE/WBE Firms**

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: CIPRIANI'S PASTA & SAUCE

Address: 1025 WEST END

E-mail: CIPRIANI.PASTA@GMAIL.COM

Contact Person: ANNETTE JOHNSON Phone: 630-851-3086

Dollar Amount Participation: \$ _____

Percent Amount of Participation: 2% %

*Letter of Intent attached? Yes ☒ No ☐

*Current Letter of Certification attached? Yes ☒ No ☐

MBE/WBE Firm: WHITNEY FOODS

Address: 2451 S. DAMEN AVE

E-mail: WHITNEYFOODS@AOL.COM

Contact Person: WHITNEY FITZGERALD Phone: 773-299-1340

Dollar Amount Participation: \$ _____

Percent Amount of Participation: 1% %

*Letter of Intent attached? Yes ☒ No ☐

*Current Letter of Certification attached? Yes ☒ No ☐

Attach additional sheets as needed.

* Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: CIPRIANI'S PASTA & SAUCE Certifying Agency: WBENC
 Contact Person: ANNETTE JOHNSON Certification Expiration Date: 11/30/2016
 Address: 1025 WEST END AVE. Ethnicity: _____
 City/State: CHICAGO HEIGHTS, IL 60411 Bid/Proposal/Contract #: 11-84-038
 Phone: 630-851-3086 Fax: _____ FEIN #: _____
 Email: Ciprianispasta@gmail.com
 Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

PAPEIR PRODUCTS, DISPOSABLES, JANITORIAL SUPPLIES & CHEMICALS.

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

29.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

[Signature]
 Signature (M/WBE)
ANNETTE M JOHNSON
 Print Name
CIPRIANI'S PASTA
 Firm Name
5-4-16
 Date

[Signature]
 Signature (Prime Bidder/Proposer)
TIMOTHY RAND
 Print Name
CBM PREMIER MANAGEMENT
 Firm Name
5/4/16
 Date

Subscribed and sworn before me

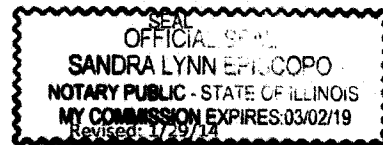
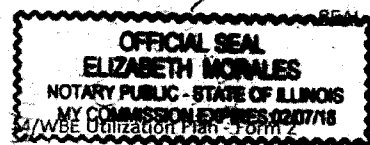
this 4 day of MAY, 2016

Notary Public [Signature]

Subscribed and sworn before me

this 4th day of MAY, 2016

Notary Public [Signature]





Cook County Government
M/WBE Certification
Reciprocal Affidavit

Firm Name CIPRIANI'S PASTA & SAUCE Contract # 11-84-038

Address 1025 WEST END AVE. City CHICAGO HEIGHTS

County COOK State IL Zip 60411

Phone 630-851-3086 Email ciprianispasta@gmail.com

I CIPRIANI'S PASTA - ANNETTE JOHNSON President
(Print Name) (Print Title)

of CIPRIANI'S PASTA do hereby affirm:
(Name of Firm)

1. CIPRIANI'S PASTA is a Minority and/or Women Business Enterprise
(Name of Firm)
currently certified by the City of Chicago, WBDC/WBENC or CMSDC as:

☐ Black ☐ Hispanic ☐ Asian ☒ Woman

2. With respect to CIPRIANI'S PASTA the personal net worth of the qualifying
(Name of Firm)
(51%) individual(s) does not exceed \$2 million, excluding the individual's ownership interest in the M/WBE firm and the equity of the owner's primary residence, and otherwise meets the requirements of Chapter 34, Article IV of the Cook County Procurement Code. (As per Section 34-263 of the Cook County Procurement Code, an individual's personal net worth includes only his or her own Share of assets held jointly or as community/marital property with the individual's spouse.)

3. The average annual gross receipts of CIPRIANI'S PASTA
(Name of Firm)
as derived from tax filings over the five most recent years, does not exceed the Small Business Size Standards published by the U.S. Small Business Administration found in Title 13, Code of Federal Regulations, Part 121.

Upon penalty of perjury, I ANNETTE M JOHNSON affirm that, to the best of my
(Print Name)

knowledge and belief, the information herein is true and accurate.

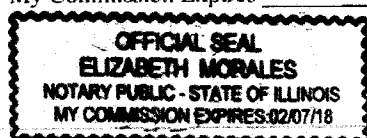
Signature [Signature] Title PRESIDENT Date 5-4-16

Subscribed and sworn to before me this 4 day of MAY, 2016
(Month) (Year)

[Signature]
(Notary's Signature)

Notary's Seal

My Commission Expires 2/7/18



Revised 3/2013



hereby grants

National Women's Business Enterprise Certification

to

Cipriani's Pasta & Sauce Inc.

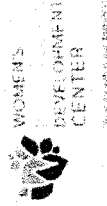
who has successfully met WBENC's standards as a Women's Business Enterprise (WBE).
This certification affirms the business is woman-owned, operated and controlled; and is valid through the date herein.

WBENC National WBE Certification was processed and validated by Women's Business Development Center - Chicago, a WBENC Regional Partner Organization.

Emilia DiMenco

Expiration Date: 11/30/2016
WBENC National Certificate Number: 2005119305

Authorized by Emilia DiMenco, President & CEO
Women's Business Development Center - Chicago



NAICS Codes: 311941, 311422, 311824, 311999, 423840, 424130, 424410, 424450, 424610, 561910, 424490

UNSPSC Codes: 50171800, 50181900, 50192902, 50192603



MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: WHITNEY FOODS, INC. Certifying Agency: COOK COUNTY
 Contact Person: WHITNEY FITZGERALD Certification Expiration Date: _____
 Address: 2451 S. DAMEN AVE. Ethnicity: _____
 City/State: CHICAGO, IL Zip: 60608 Bid/Proposal/Contract #: 11-84-038
 Phone: 773-299-1340 Fax: 773-299-1345 FEIN #: _____
 Email: whitneyfoods@aol.com
 Participation: [] Direct [] Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No [] Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

FRESH PRODUCE, FRESH & FROZEN VEGETABLES, FRUITS & FRUIT MIXES, CAN GOODS

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

1%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (M/WBE) [Signature]
 Print Name Whitney Fitzgerald
 Firm Name Whitney Foods Inc.
 Date 5/2/16

Signature (Prime Bidder/Proposer) [Signature]
 Print Name TIMOTHY RAND
 Firm Name CBM PREMIER MANAGEMENT
 Date 5/2/16

Subscribed and sworn before me
 this 2 day of MAY, 2016

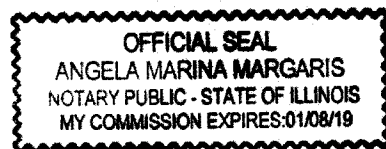
Notary Public [Signature]

SEAL

Subscribed and sworn before me
 this 2nd day of May, 2016

Notary Public [Signature]

SEAL



City / Cook
St / DuSable
 Revised: 1/29/14



TONI PRECKWINKLE

PRESIDENT

**Cook County Board
of Commissioners**

RICHARD R. BOYKIN
1st District

ROBERT STEELE
2nd District

JERRY BUTLER
3rd District

STANLEY MOORE
4th District

DEBORAH SIMS
5th District

JOAN PATRICIA MURPHY
6th District

JESUS G. GARCIA
7th District

LUIS ARROYO, JR.
8th District

PETER N. SILVESTRI
9th District

BRIDGET GAINER
10th District

JOHN P. DALEY
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JOHN A. FRITCHEY
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LARRY SUFFREDIN
13th District

GREGG GOSLIN
14th District

TIMOTHY O. SCHNEIDER
15th District

JEFFREY R. TOBOLSKI
16th District

SEAN M. MORRISON
17th District

OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60602 • (312) 603-5502

April 28, 2016

VIA EMAIL whitneyfoods@aol.com

Ms. Whitney Fitzgerald, President
Whitney Foods, Inc.
2541 South Damen Avenue
Chicago, IL 60608

Re: Cook County MBE/WBE/VBE Certification Extension

Dear Ms. Fitzgerald:

Please be advised that your status as a certified Minority Business Enterprise (MBE), Women's Business Enterprise (WBE) and/or Veteran Business Enterprise (VBE) has been extended until May 28, 2016.

This extension is provided to ensure a thorough review of your company's documentation and to allow your company the time to submit additional information and documents if requested.

This Certification Extension does not guarantee continued eligibility in Cook County's MBE/WBE/VBE Program.

In responding to procurement opportunities, as evidence of your current MBE/WBE/VBE certification with Cook County, you may include this Extension Letter and most recent Certification Letter with your submission.

If you have any questions, please feel free to contact Laura Russo at (312) 603-4700.

Sincerely,

Lisa Alexander
Contract Compliance Deputy Director

LA/lar

MBE/WBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions – Section 19.

I. **BIDDER/PROPOSER MBE/WBE STATUS:** (check the appropriate line)

- ☐ Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of current Letter of Certification)
- ☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountil.gov/contractcompliance)
- ☒ Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. ☒ **Direct Participation of MBE/WBE Firms** ☐ **Indirect Participation of MBE/WBE Firms**

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: MCMAHON FOOD CORPORATION

Address: 2110 S. MARSHALL BLVD.

E-mail: bridget.mcmahonhealy@gmail.com

Contact Person: BRIDGET MCMAHON Phone: 773-522-0100

Dollar Amount Participation: \$ _____

Percent Amount of Participation: 5% %

*Letter of Intent attached? Yes ☒ No _____

*Current Letter of Certification attached? Yes ☒ No _____

MBE/WBE Firm: LA BAGUETTE NORTH, INC

Address: 5712 N. CLARK ST.

E-mail: CHOBY 78@HOTMAIL.COM

Contact Person: GUILLERMINA URIBE Phone: 773-878-8556

Dollar Amount Participation: \$ _____

Percent Amount of Participation: 3% %

*Letter of Intent attached? Yes ☒ No _____

*Current Letter of Certification attached? Yes ☒ No _____

Attach additional sheets as needed.

* Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: McMAHON FOOD CORPORATION Certifying Agency: COOK COUNTY
 Contact Person: BRIDGET McMAHON-HEALY Certification Expiration Date: 7/7/2016
 Address: 2110 S. MARSHALL BLVD Ethnicity: _____
 City/State: CHICAGO, IL Zip: 60623 Bid/Proposal/Contract #: 11-84-038
 Phone: 773-522-0100 Fax: 773-522-0393 FEIN #: 36-3746373
 Email: bridget.mcmahanhealy@gmail.com
 Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

DAIRY PRODUCT DISTRIBUTION

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

5%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Bridget McMahon Healy
 Signature (M/WBE)

Bridget McMahon Healy
 Print Name

McMahon Food Corporation
 Firm Name

05-02-2016
 Date

Subscribed and sworn before me

this 2nd day of May, 2016.

Notary Public Catherine Grasz

SEAL

Timothy Rand
 Signature (Prime Bidder/Proposer)

TIMOTHY RAND
 Print Name

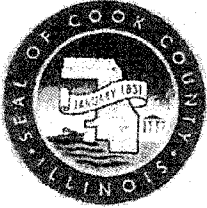
CBM PREMIER MANAGEMENT
 Firm Name

5/2/16
 Date

Subscribed and sworn before me

this 2nd day of May, 2016.

Notary Public Sandra Lynn Episcopo



COUNTY OF COOK BUREAU OF FINANCE
OFFICE OF CONTRACT COMPLIANCE
JACQUELINE GOMEZ, DIRECTOR

118 N Clark, Room 1020 | Chicago, Illinois 60602-1304 | Tel (312) 603-5502

TONI PRECKWINKLE

PRESIDENT

Cook County Board
of Commissioners

RICHARD R. BOYKIN
1st District

ROBERT STEELE
2nd District

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3rd District

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4th District

DEBORAH SIMS
5th District

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6th District

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7th District

LUIS ARROYO JR.
8th District

PETER N. SILVESTRI
9th District

BRIDGET GAINER
10th District

JOHN P. DALEY
11th District

JOHN A. FRITCHEY
12th District

LARRY SUFFREDIN
13th District

GREGG GOSUN
14th District

TIMOTHY O. SCHNEIDER
15th District

JEFFREY R. LOBOLSKI
16th District

ELIZABETH ANN DOODY GORMAN
17th District

July 7, 2015

Ms. Bridget McMahon Healy, President
McMahon Food Corporation
2110 S. Marshall Blvd.
Chicago, IL 60623

Annual Certification Expires: July 7, 2016

Dear Ms. Healy:

Congratulations on your continued eligibility for Certification as **Women-owned Business Enterprise (WBE)** by Cook County Government. This certification is valid until **July 7, 2020**; however, you must re-validate your firms' certification annually.

As a condition of continued Certification during the five (5) year term, you must file an annual **"No Change Affidavit"** within **sixty (60) business days** prior to the date of the annual expiration. Failure to file this Affidavit may result in the termination of your Certification. You must notify Cook County's Office of Contract Compliance of any change in ownership or control or any other matters or facts affecting your firm's eligibility for Certification within **fifteen (15) business days** of such change.

Cook County Government may commence action to remove your firm as a certified vendor if you fail to notify us of any changes of facts affecting your firm's Certification, or if your firm otherwise fails to cooperate with the County in any inquiry or investigation. Removal of your status may also be commenced if your firm is found to be involved in bidding or contractual irregularities.

Your firm's name will be listed in Cook County's Directory of certified firms in the following area(s) of specialty:

Regular Dealer: Dairy Product and Fruit Juice Distribution

Your firm's participation on Cook County contracts will be credited toward **WBE** goals in your area(s) of specialty. While your participation on Cook County contracts is not limited to your specialty, credit toward **WBE** goals will be given only for work done in the specialty category.

Thank you for your continued interest in Cook County Government's Minority, Women and Veteran Business Enterprise Programs.

Sincerely,

Jacqueline Gomez
Contract Compliance Director
JG/ek

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: LA BAGUETTE NORTH, INC

Certifying Agency: COOK COUNTY

Contact Person: GUILLERMINA URIBE

Certification Expiration Date: 12-23-16

Address: 5712 N CLARK STREET

Ethnicity: HISPANIC

City/State: CHICAGO, IL Zip: 60660

Bid/Proposal/Contract #: 11-84-038

Phone: 773-878-8556 Fax: 773-878-8580

FEIN #: 36-4435429

Email: CHOB789HOTMAIL.COM

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

BAKERY PRODUCTS

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

39%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (M/WBE)

Signature (Prime Bidder/Proposer)

Print Name

Print Name

Firm Name

Firm Name

Date

Date

Subscribed and sworn before me

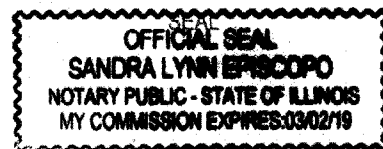
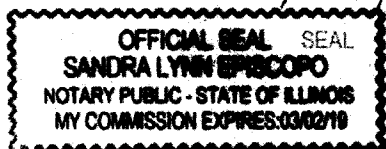
Subscribed and sworn before me

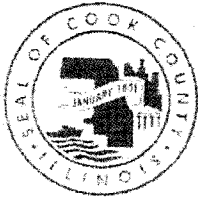
this 1st day of May, 2016

this 29th day of April, 2016

Notary Public

Notary Public





OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60602 • (312) 603-5502

December 23, 2015

TONI PRECKWINKLE

PRESIDENT
Cook County Board
of Commissioners

RICHARD R. BOYKIN
1st District

ROBERT STEELE
2nd District

JERRY BUTLER
3rd District

STANLEY MOORE
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JOAN PATRICIA MURPHY
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GREGG GOSLIN
14th District

TIMOTHY O. SCHNEIDER
15th District

JEFFREY R. TOBOLSKI
16th District

SEAN M. MORRISON
17th District

Ms. Guillermina Uribe, President
La Baguette North, Inc.
5712 North Clark Street
Chicago, IL 60660

Re: Annual Certification Expires: December 23, 2016

Dear Ms. Uribe:

Congratulations on your continued eligibility for Certification as a **Minority-owned Business Enterprise (MBE)** and **Woman-owned Business (WBE)** by Cook County Government. This MBE/WBE Certification is valid until **December 23, 2016**.

As a condition of continued Certification, you must file a **"Re-Certification Affidavit"** within **sixty (60) business days** prior to the date of Annual Certification Expiration. Failure to file this Affidavit shall result in the termination of your Certification. You must notify Cook County Government's Office of Contract Compliance of any change in ownership or control or any other matters or facts affecting your firm's eligibility for Certification within **fifteen (15) business days** of such change.

Cook County Government may commence action to remove your firm as an MBE/WBE vendor if you fail to notify us of any changes of facts affecting your firm's Certification, or if your firm otherwise fails to cooperate with the County in any inquiry or investigation. Removal of status may also be commenced if your firm is found to be involved in bidding or contractual irregularities.

Your firm's name will be listed in Cook County's Directory of certified firms in the following area(s) of specialty:

Manufacturing: Retail Bakery

Your firm's participation on Cook County contracts will be credited toward MBE or WBE goals in your area(s) of specialty. While your participation on Cook County contracts is not limited to your specialty, credit toward MBE or WBE goals will be given only for work performed in the specialty category.

Thank you for your continued interest in Cook County Government's Minority, Women, Veteran, and Service-Disabled Veteran Business Enterprise Programs.

Sincerely,

Jacqueline Gomez

Jacqueline Gomez
Contract Compliance Director

JG/lar

Contract No. 11-84-038
Vendor Name: CBM PREMIER MANAGEMENT, LLC

Economic Disclosures Statements

**COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX**

Section	Description	Pages
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1- 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15-17
6	Cook County Signature Page	EDS 18

SECTION 1
INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or *Contracting Party* means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or *lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyl.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

SECTION 2

CERTIFICATIONS

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.

C. DRUG FREE WORKPLACE ACT

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: *The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, by a local municipality, or by the Illinois Department of Revenue, which such tax or fee is delinquent, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name

Address

N/A

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

Local business means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

- a) Is Applicant a "Local Business" as defined above?

Yes: X No: _____

- b) If yes, list business addresses within Cook County:

5680 South Archer Ave
Chicago, IL 60638

- c) Does Applicant employ the majority of its regular full-time workforce within Cook County?

Yes: X No: _____

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): _____

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX
NUMBERS)

OR:

- b) X The Applicant owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the ☒ Applicant or ☐ Stock/Beneficial Interest Holder

This Statement is an: ☐ Original Statement or ☒ Amended Statement

Identifying Information:

Name CBM Premier Management, LLC

D/B/A: _____ FEIN NO.: 45-5615904

Street Address: 5680 South Archer Ave

City: Chicago State: IL Zip Code: 60638

Phone No.: 312 432 0399 Fax Number: 312-432-1508 Email: marlin.segnoha@cbmmanagementservices.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 0387352-8

Form of Legal Entity:

☐ Sole Proprietor ☐ Partnership ☒ LLC Corporation ☐ Trustee of Land Trust

☐ Business Trust ☐ Estate ☐ Association ☐ Joint Venture

☐ Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
HMS LLC	500 East 52nd St., N., Sioux Falls, SD	33 1/3 %
The Buona Companies, LLC	6801 W. Roosevelt Road, Berwyn, IL	33 1/3 %
Airport Restaurant Management, Inc.	41 West 84th St., Chicago, IL	33 1/3 %

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [☒] No
If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Same as #1 above			

Declaration (check the applicable box):

- ☒ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- [] I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Marlin C. Sejnoha, HMS, LLC
Name of Authorized Applicant/Holder Representative (please print or type)

[Signature]
Signature

marlin.sejnoha@cbmmanagedservices.com
E-mail address

Managing Member
Title

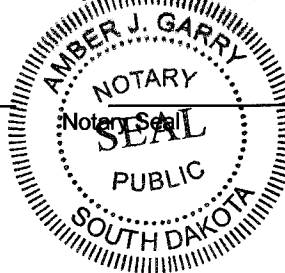
May 10, 2016
Date

605-335-0825
Phone Number

Subscribed to and sworn before me
this 10th day of May, 2016.

x [Signature]
Notary Public Signature

My commission expires: March 1, 2017





COOK COUNTY BOARD OF ETHICS
69 W. WASHINGTON STREET, SUITE 3040
CHICAGO, ILLINOIS 60602
312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

"Familial relationship" means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- | | | |
|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Grandparent | <input type="checkbox"/> Stepfather |
| <input type="checkbox"/> Child | <input type="checkbox"/> Grandchild | <input type="checkbox"/> Stepmother |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Father-in-law | <input type="checkbox"/> Stepson |
| <input type="checkbox"/> Sister | <input type="checkbox"/> Mother-in-law | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Aunt | <input type="checkbox"/> Son-in-law | <input type="checkbox"/> Stepbrother |
| <input type="checkbox"/> Uncle | <input type="checkbox"/> Daughter-in-law | <input type="checkbox"/> Stepsister |
| <input type="checkbox"/> Niece | <input type="checkbox"/> Brother-in-law | <input type="checkbox"/> Half-brother |
| <input type="checkbox"/> Nephew | <input type="checkbox"/> Sister-in-law | <input type="checkbox"/> Half-sister |

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY

Name of Person Doing Business with the County: CBM Premier Management, LLC

Address of Person Doing Business with the County: 5680 S. Archer Ave, Chicago, IL 60638

Phone number of Person Doing Business with the County: (312) 432-0399

Email address of Person Doing Business with the County: marlin.sejnoha@cbmmanagedservices.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

Marlin Sejnoha, Managing Member

B. DESCRIPTION OF BUSINESS WITH THE COUNTY

Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: 11-84-038

The aggregate dollar value of the business you are doing or seeking to do with the County: \$12,070,000.00

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: Shannon Andrews, CPO

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: Shannon Andrews, CPO

C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS

Check the box that applies and provide related information where needed

- ☐ The Person Doing Business with the County is an individual and there is no familial relationship between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
- ☒ The Person Doing Business with the County is a business entity and there is no familial relationship between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

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**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

- ☐ The Person Doing Business with the County is an **individual** and there is a **familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

- ☐ The Person Doing Business with the County is a **business entity** and there is a **familial relationship** between at least one member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

VERIFICATION: To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

Signature of Recipient

Date

May 10, 2016

SUBMIT COMPLETED FORM TO:

Cook County Board of Ethics
69 West Washington Street, Suite 3040, Chicago, Illinois 60602
Office (312) 603-4304 – Fax (312) 603-9988
CookCounty.Ethics@cookcountyil.gov

* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (*i.e.* in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, including Substantial Owners, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information.

I. Contract Information:

Contract Number: 11-84-038

County Using Agency (requesting Procurement): _____

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): CBM Premier Management, LLC

Substantial Owner Complete Name: _____

FEIN# 45-5615904

Date of ^{Inc.} Birth: _____

E-mail address: marlw.segnoha@cbmmanagementservices.com

Street Address: 5680 South Archer Ave

City: Chicago

State: IL Zip: 60638

Home Phone: 312 432-0399

Driver's License No: N/A

III. Compliance with Wage Laws:

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq., YES or **(NO)**

Illinois Minimum Wage Act, 820 ILCS 105/1 et seq., YES or **(NO)**

Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq., YES or **(NO)**

Employee Classification Act, 820 ILCS 185/1 et seq., YES or **(NO)**

Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq., YES or **(NO)**

Any comparable state statute or regulation of any state, which governs the payment of wages YES or **(NO)**

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

IV. Request for Waiver or Reduction

If Person/Substantial Owner answered "Yes" to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner
YES or NO

Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation
YES or NO

Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default
YES or NO

Other factors that the Person or Substantial Owner believe are relevant.
YES or NO

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

V. Affirmation

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

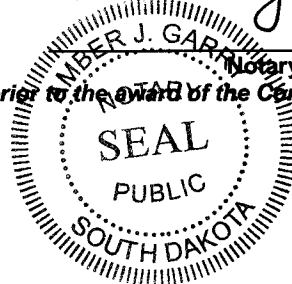
Signature: _____

Date: May 10, 2016

Name of Person signing (Print): Marlin C. Signoha Title: Managing Member

Subscribed and sworn to before me this 10th day of May, 20 16

x Amber A. Garry
Notary Public Signature



Expires March 1, 2017

Note: The above information is subject to verification prior to the award of the Contract.

SECTION 5

CONTRACT AND EDS EXECUTION PAGE

PLEASE EXECUTE THREE ORIGINAL PAGES OF EDS

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

Execution by Corporation

Corporation's Name

President's Printed Name and Signature

Telephone

Email

Secretary Signature

Date

CBM Premier Management, LLC

LLC Name

Date

May 10, 2016

Execution by LLC

Marlin E. Signoha

*Member/Manager Printed Name and Signature

312-432-0399

marlin.signoha@cbmmanagementservices.com

Telephone and Email

Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

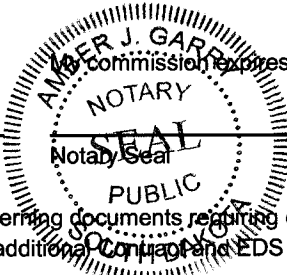
Telephone and Email

Subscribed and sworn to before me this

10th day of May, 2016.

Notary Public Signature

Amber J. Garry



*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.